

What's Next for EHR Certification?: And What Product Certification Means for HIM

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by Mark Hagland

In July the Certification Commission for Healthcare Information Technology (CCHIT) announced the first certified ambulatory electronic health record (EHR) products for office-based physicians and providers. Certified products meet baseline levels of functionality, interoperability, and security in compliance with the independent, voluntary organization's published criteria.

The announcement marked a major milestone in CCHIT's three-year plan to create a certification process for ambulatory and inpatient products and the network components that connect them. Certification encourages EHR adoption by limiting the risk associated with investing in this complicated, evolving technology.

AHIMA is a cofounder of CCHIT, and HIM professionals have been actively involved in the development of the certification process. That's only natural, says Mark Leavitt, MD, PhD, chair of CCHIT. After all, HIM professionals will be key members of the teams that select and implement clinical information systems.

Leavitt spoke with the Journal of AHIMA about the marketplace, new work on certification of inpatient EHRs, and the HIM connection with certification shortly after the first certified ambulatory products were announced in July.

Journal of AHIMA: Next up is the development of inpatient system criteria. Can you discuss progress in that area?

Leavitt: This is a big area compared to ambulatory—more complex, and there are more vendors. People want to see something in 2007. Timing is always a challenge, [and] we're on a very rapid schedule. But we can't take any shortcuts, because this is potentially so influential, and it's so visible.

JAHIMA: And it's very complicated on the inpatient side.

Leavitt: Yes, so we seem to be focusing literally on specifics: what is computerized order entry? What is a pharmacy system? What are the criteria for the basic definitions of the modules that exist, and what does [a vendor] have to offer to call it that? Because a vendor might say, "This fulfills your needs there," and yet it isn't really complete. So we could make more concise the definitions of the products to reduce confusion.

JAHIMA: What effect will certification have on vendors?

Leavitt: Ultimately, we believe we can help the industry mature. We're at a stage where there's confusion in the marketplace, and that has slowed adoption. Certainly that was true in the ambulatory area. We think that what you'll see is that the marketplace will become less confused and more vigorous, actually.

JAHIMA: Do you foresee fewer competitors among vendors as a result?

Leavitt: This actually will sharpen competition in ways that will benefit everyone. When you have a doctor and he's not sure about his needs and what to buy, and there are 200 ads in the Journal and 200 booths at the convention, the doctor and his office staff spend a lot of extra time exploring potential vendors. That's wasteful. We want the competition to continue. That's why we've gone with a single form of certification rather than relative ratings. We also want to make the advancement of the marketplace more orderly.

JAHIMA: What do you expect HIM professionals will think of the certification process and of the ongoing evolution of the marketplace?

Leavitt: They're going to be very interested, because they're often called on to play a key role in their organizations to help select and implement. We've had AHIMA as one of our founding partners, and HIM professional participants at every step, so it goes without saying that this is important to them, and it's important to us.

JAHIMA: And where is HIM expertise best applied, with regard to product evaluation and implementation, in the context of certification?

Leavitt: I think most HIM professionals would look at this and be very pleased to see certification, for a number of reasons. The best reason is that it's going to help them employ their skills at the highest level possible. So instead of them having to spend their time convincing their organizations of the value of the basics, they'll be able to work on a higher level. So I think it raises their value.

And the fact that we're going to have some standards means that they can probably help their organizations get more out of the systems they purchase. And I think that's a role they'll like. Rather than just fighting fires, they can say, "Let's make sure to get more value out of the system." And those still doing health information management in a paper environment now have another tool to help them overcome objections to moving forward with automation.

JAHIMA: Is there anything else HIM professionals can do?

Leavitt: We want them to leverage our work to the fullest extent possible. So they need to know not only what products are certified, but we want them to dig into our work; they are the professionals who can look into detail at some of the technical aspects of this. And they can study how the tests went; and they can look at specific areas they care about.

They can leverage the work a lot, and the work is all published, all in the public domain [at www.cchit.org]. And what can we do to add value? We'd like to hear from them. We'd love to do professional seminars. The profession has been very active with us; we want that to continue, but we're open to adding even more value to the marketplace.

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